Form NLRB - 501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

The state of the s	EMPLOYER AGAINST WHOM CHARGE IS BRO	DUGHT
a. Name of Employer Envita Medical Center		b. Tel. No. (602)569-4144
		c. Cell No.
d. Address (street, city, state ZIP code) 8759 E Bell Road	e. Employer Representative Brian Harrison	f. Fax No. (602)569-4244
Building G	President	g. e-Mail
Scottsdale, AZ 85260	301 mar sandaning sandani	brianh@envita.com
		h. Dispute Location (City and State) Scottsdale, AZ
<ul> <li>Type of Establishment (factory, nursing home, hotel)</li> </ul>	j. Principal Product or Service	k. Number of workers at dispute location
Outpatient Clinic	Cancer and Lyme Disease Clinic	100
I. The above-named employer has engaged in an		
National Labor Relations Act, and these unfair lab practices are unfair practices affecting commerce		
<ol><li>Basis of the Charge (set forth a clear and conci</li></ol>	ise statement of the facts constituting the alleged u	infair labor practices)

concerted activities.

By the above and other acts, the above-named employer has interfered with, restrained, and coerced employees in the exercise of their rights under Section 7 of the National Labor Relations Act.

During the past six months, the above-named employer has interfered with, restrained, and coerced employees in the exercise of their rights under Section 7 of the National Labor Relations Act, by its actions, including, but not limited to, causing the termination of its employees, including, but not limited to, (b) (6), (b) (7)(C), because they engaged in protected,

2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5000 <u>10000</u>	N 10 - 300 - 320 - 320
<ol> <li>Full name of party filing charge (if labor organization, give (b) (6), (b) (7)(C)</li> </ol>	full name, including local name and numb	per)
4a, Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)		4b. Tel. No.
		4c. Cell No. (b) (6), (b) (7)(C)
		4d. Fax No.
		4e. e-Mail
Full name of national or international labor organization or	f which it is an affiliate or constituent unit (	(b) (6), (b) (7)(C)
organization)	· · · · · · · · · · · · · · · · · · ·	
6. DECLARATION	- was the term	Tel. No.
I declare that I have read the above charge and that the my knowledge and belief.	ne statements are true to the best of	
(b) (6), (b) (7)(C)		Office, if any, Cell No.
By:	(b) (6), (b) (7)(C) an Individual	(b) (6), (b) (7)(C)
(sig aking charge)	Print Name and Title	Fax No.
Address: (b) (6), (b) (7)(C)	Date:	e-Mail
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)

# WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT



# UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD REGION 28 2600 North Central Avenue

Suite 1400 Phoenix, AZ 85004-3099

Agency Website: www.nlrb.gov Telephone: (602) 640-2160 Fax: (602) 640-2178

May 14, 2020

Jan Hutchinson, Attorney at Law Marshall Hunt, Attorney at Law Davis Miles McGuire Gardner, PPLC 40 East Rio Salado Parkway, Suite 425 Tempe, AZ 85283

> Re: Envita Medical Center

> > Case 28-CA-258731

Dear Ms. Hutchinson and Mr. Hunt:

The Charging Party has asked to withdraw the above charge based upon a private agreement between the parties. I have approved this request, conditioned on the performance of the undertakings in that private agreement.

The charge is subject to reinstatement for further processing if the Charging Party requests reinstatement and supports its request with evidence of non-compliance with the undertakings in the private agreement.

Very truly yours,

/s/ Cornele A. Overstreet

Cornele A. Overstreet Regional Director

Envita Medical Center cc: 8759 East Bell Road, Building G Scottsdale, AZ 85260

Elliot Isaac, Attorney at Law 14820 North Cave Creek Road, Suite 3 Phoenix, AZ 85032

(b) (6), (b) (7)(C)

CAO:NG:mhz

INTERNET FORM NLRB-501

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	28-CA-258831	Date Filed April 6, 2020

#### INSTRUCTIONS:

file an original with NLRB Regional Director for the region in which the		g.	
a. Name of Employer	GAINST WHOM CHARGE IS BROUGHT	b. Tel. No.	
Tucson Medical Center	(520) 324-1794		
		c. Cell No. (520) 324-1794	
2		f. Fax No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	a a Mail	
5301 E. Grant Ro	Joy Hall	g. e-Mail	
AZ Tucson 85712	HR Generalist	Joy.Hall@tmcaz.com	
		h. Number of workers employed 4000	
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service		
Healthcare	Healthcare		
k. The above-named employer has engaged in and is engaging i	n unfair labor practices within the meaning of secti	on 8(a), subsections (1) and (list	
subsections)	of the National Labor	r Relations Act, and these unfair labor	
practices are practices affecting commerce within the meaning within the meaning of the Act and the Postal Reorganization A	그렇게 하다 나는 아니는 아이들이 아이들이 살아 되었다. 그렇게 하는 말이 아니는 말이 얼마를 하는데 아니는 아이들이 아이들이 아이들이 얼마를 하는데 하는데 아이들이 없는데 아이들이 없다.	air practices affecting commerce	
2. Basis of the Charge (set forth a clear and concise statement of	of the facts constituting the alleged unfair labor pra	ctices)	
E 4		•	
See additional page			
2. Full name of party filing charge (if labor arganization give full	name, including local name and number)		
3. Full name of party filing charge (if labor organization, give full	name, including local hame and humber)		
Title:			
4a. Address (Street and number, city, state, and ZIP code)	4	4b. Tel. No. (b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C)	4	(b) (6), (b) (7)(C)	
		4d. Fax No.	
	4	łe. e-Mail	
		(b) (6), (b) (7)(C)	
<ol><li>Full name of national or international labor organization of whorganization)</li></ol>	ich it is an affiliate or constituent unit (to be filled in	when charge is filed by a labor	
	TS	T-1 N-	
DECLARATION  I declare that I have read the above charge and that the statements and that the statements are considered.  Output  Description:	AND THE RESIDENCE AND THE STORM AND ADDRESS OF	Tel. No. (b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C)	b) (6); (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)	
The second secon	Print/type name and title or office, if any)	Fax No.	
	500 20000		
(b) (6), (b) (7)(C)	120	e-Mail	
	04/6/2020 16:26:32 (date)	(b) (6), (b) (7)(C)	
Address	(date)		

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

# **Basis of the Charge**

### 8(a)(1)

Within the previous six months, the Employer discharged an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, discussing wages and/or other terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee discharged	Approximate date of discharge
(b) (8), (b) (7)(C)	



### UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD REGION 28

2600 North Central Avenue

Suite 1400 Phoenix, AZ 85004-3099 Agency Website: www.nlrb.gov Telephone: (602)640-2160

Fax: (602)640-2178

April 28, 2020

Joseph A. Kroeger, Attorney at Law Snell & Wilmer One South Church Street, Suite 1500 Tucson, AZ 85701-1630

Re: Tucson Medical Center

Case 28-CA-258831

Dear Mr. Kroeger:

The Charging Party has asked to withdraw the above charge based upon a private agreement between the parties. I have approved this request, conditioned on the performance of the undertakings in that private agreement.

The charge is subject to reinstatement for further processing if the Charging Party requests reinstatement and supports its request with evidence of non-compliance with the undertakings in the private agreement.

Very truly yours,

/s/ Cornele A. Overstreet

Cornele A. Overstreet Regional Director

cc: Tucson Medical Center 5301 E. Grant Road Tucson, AZ 85712

(b) (6), (b) (7)(C)

CAO:KAS:mhz

Form NLRB - 501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
28-CA-259884	5/4/2020

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice	occurred or is occurring.	
1.	EMPLOYER AGAINST WHOM CHARGE IS BRO	UGHT	
a. Name of Employer Northern Arizona Health Care/Flagstaff Medical Center		b. Tel. No. (928)773-2094 c. Cell No.	
d. Address (street, pity, state ZIP code) 1200 N Beaver Street Flagstaff, AZ 86001	e. Employer Representative Dick Sharp Chief Human Resources Officer	g. e-Mail dick.sharp@nahealth.com h. Dispute Location (City and State) Flagstaff, AZ	
Type of Establishment (factory, nursing home, hotel)     Hospital and Medical Center	j. Principal Product or Service Healthcare Services	k. Number of workers at dispute location 2,500	

(b) (6), (b) (7)(C) a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b.	Tel. No.
er (en (er ere)		Cell No. b) (6), (b) (7)(C)
		Fax No.
	4e.	e-Mail 0) (6), (b) (7)(C)
rganization)	which it is an affiliate or constituent unit (to be	
rganization)		
DECLARATION I doclare that I have read the above charge and that the	e statements are true to the best of	l. No.
genization)	e statements are true to the best of	
DECLARATION I doclare that I have read the above charge and that the my knowledge and belief.  (b) (6), (b) (7)(C)	e statements are true to the best of  (b) (6), (b) (7)(C)  an Individual	i. No. lice, if any, Cell No. b) (6), (b) (7)(C)
DECLARATION I doclare that I have read the above charge and that the my knowledge and belief.	e statements are true to the best of  (b) (6), (b) (7)(C)  an Individual	i. No.

# WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

REGION 03 130 S Elmwood Ave Ste 630 Buffalo, NY 14202-2465 Agency Website: www.nlrb.gov Telephone: (716)551-4931 Fax: (716)551-4972

June 9, 2020

Dick Sharp, Chief Human Resources Officer Northern Arizona Healthcare/Flagstaff Medical Center 1200 N Beaver St Flagstaff, AZ 86001-3118

Re: Northern Arizona Health Care d/b/a

Flagstaff Medical Center Case 28-CA-259884

Dear Mr. Sharp:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

/s/ Paul J. Murphy

PAUL J. MURPHY Regional Director

cc:

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C), (b) (7)(C)

**☑** 0001/0001

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

#### CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE

Case Date Filed

28-CA-260452 May 13, 2020

	Director in which the alleged unfair labor practice of	
	EMPLOYER AGAINST WHOM CHARGE IS BROL	JGHT
Name of Employer		b. Tel. No.
Valley Wide Health Centers, Inc.		(602) 344-5011
		c. Cell No.
		o. con rec.
d. Address (street, city, state ZIP code)	La Caralana Barrana Artica	- / F. N
	e. Employer Representative	f. Fax No.
2601 E Roosevelt St, Phoenix, AZ	James Castillo, Nursing Manager	
85008		g. e-Mail
		Accordance and the t
	i	h. Dispute Location (City and State)
		Phoenix, AZ
I. Type of Establishment (factory, nursing home,	j. Principal Product or Service	k. Number of workers at dispute location
	j. Finisipal Froduct of Scivica	K. Nomber of Workers at dispute location
hotel)		
Hospital	Health Services	~300
	d is engaging in unfair labor practices within the me	
	or practices are practices affecting commerce within	
	within the meaning of the Act and the Postal Reorg	
2. Basis of the Charge (set forth a clear and concil	se statement of the facts constituting the alieged un	deir labor practices)
During the past six months, the above	-named employer has interfered with, res	strained, and coerced employees in the
	7 of the National Labor Relations Act. by	
exercise of their rights under Section is	of the National Labor Relations Act. by	ts actions, including, but not innited to,
	ees, including, but not limited to, (b) (6), (b	because they engaged in
protected, concerted activities.	10	
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District the share and other sets the share		
	re-named employer has interfered with, re	estrained, and coerced employees in
	on 7 of the National Labor Relations Act.	
	ation, give full name, including local name and num	ben
(b) (6), (b) (7)(C)		
4a, Address (street and number, city, state, and Z	IP code)	4b, Tel, No.
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)
		4c, Cell No.
		40, Cell No.
		4d. Fax No.
× ×		4e. e-Mail
		(b) (6), (b) (7)(C)
5. Full name of national or international labor orda	nization of which it is an affiliate or constituent unit	
organization)		
w.gamaduur/		
		T
6. DECLARATION	V-2	Tel. No.
I declare that I have read the above charge a	and that the statements are true to the best of	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		
(b)(b),(b)(1)(c)		Office, if any, Cell No.
E	(b) (6), (b) (7)(C), an Individual	300
( making c		Fax No.
, making o	THE STATE OF THE S	
(b) (c) (b) (7)(c)		
Address: (b) (6), (b) (7)(C)		
	Date: 05.13 2000	o-Mail
(b) (6), (b) (7)(C)	Date: 05.13 - 2000	(b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfuir labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942–43 (Dec. 13, 2006). The NLRB will further explain these uses upon request, Disclosure of this information to the

NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

REGION 21 US Court House, Spring Street 312 N Spring Street, 10th Floor Los Angeles, CA 90012

Agency Website: www.nlrb.gov Telephone: (213)894-5200 Fax: (213)894-2778

June 25, 2020

Christopher J. Meister, Esq.
Ogletree, Deakins, Nash, Smoak, and Stewart, P. C. <a href="mailto:christopher.meister@ogletree.com">christopher.meister@ogletree.com</a>

Re: Valley Wide Health Centers, Inc.

Case 28-CA-260452

Dear Mr. Meister:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

William B. Cowen Regional Director

cc:

(b) (6), (b) (7)(C)

James Castillo, Nursing Manager Valley Wide Health Centers, Inc. 2601 E. Roosevelt St., Phoenix, AZ 85008 Form NLAB 501 (2-08)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
28-CA-261204	May 29, 2020	

File an original of this charge with NLRB Regional 1,	EMPLOYER AGAINST WHOM CHARGE	S BROUGHT
a. Name of Employer Banner Health		b. Tel. No. (520)874-6933
		c. Cell No. (520)869-6771
d. Address (street, city, state ZIP code) e. Employer Representative 2800 Fast Alo Way Cynthia Sank		f. Fax No.
2800 East Ajo Way Tucson, AZ 85706	Behavioral Manager	g. e-Mail cynthia.sank@bannerhealth.com
		h. Dispute Location (City and State) Tucson, AZ
Type of Establishment (factory, nursing home, hotel)     Hospital	j. Principal Product or Service Behavioral Health	k. Number of workers at dispute location 400
National Labor Relations Act, and these unfair lat practices are unfair practices affecting commerce 2. Basis of the Charge (set forth a clear and conc During the past six months, the above exercise of their rights under Section discharging its employees, including, activities.	within the meaning of the Act and the Post issestatement of the facts constituting the atenaned employer has interfered with the National Labor Relations but not limited to,	In the meaning of section 8(a), subsections (1) of the cree within the meaning of the Act, or these unfair labor all Reorganization Act.  Illeged unfair labor practices) with, restrained, and coerced employees in the Act, by its actions, including, but not limited to: because they engaged in protected, concerted with, restrained, and coerced employees in

3. Full name of party filing charge (if labor organization, (b) (6), (b) (7)(C)		
(b) (6), (b) (7)(C)	de)	(b) (6), (b) (7)(C)
		(b) (6), (b) (7)(C)
		4d. Fax No.
		(b) (6), (b) (7)(C)
5. Full name of national or international labor organization organization)	on of which it is an affiliate or constituent unit (to	De mice in which change is med by a nation
6. DECLARATION I de above charge and the	at the statements are true to the best of	Tel. No. (b) (6), (b) (7)(C)
	(b) (6), (b) (7)(C) an individual	Office, if any, Cell No. (b) (6), (b) (7)(C)
(5)	Print Name and Title	Fax No.
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	Date: 5/29/2020	(b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TTTLE 18, SECTION 1001)
PRIVACY ACT STATEMENT
Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information will cause the NLRB to decline to invoke its processes.

REGION 03 130 S Elmwood Ave Ste 630 Buffalo, NY 14202-2465

Agency Website: www.nlrb.gov Telephone: (716)551-4931 Fax: (716)551-4972

June 12, 2020

Thomas M. Stanek, Esq.
Ogletree, Deakins, Nash, Smoak And Stewart, P.C.
2415 E. Camelback Rd., Ste. 800
Phoenix, AZ 85016

Elizabeth M. Soveranez, Esq. Ogletree Deakins Nash Smoak and Stewart PC 2415 East Camelback Road Suite 800 Phoenix, AZ 85016

> Re: Banner Health Medical Center Case 28-CA-261204

Dear Mr. Stanek and Ms. Soveranez:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

/s/ Paul J. Murphy

PAUL J. MURPHY Regional Director

cc: Cynthia Sank, Behavioral Manager Banner Health Medical Center 2800 East Ajo Way Tucson, AZ 85706

(b) (6), (b) (7)(C)

Form NLRB - 501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
28-CA-261546	June 8, 2020

	. EMPLOYER AGAINST WHOM CHARGE IS BROU	JGHT
a. Name of Employer Kingman Regional Medical Center		b. Tel. No. (928)757-2101
		c. Cell No.
. Address (street, city, state ZIP code) 3269 Stockton Hill Road, Kingman,	e. Employer Representative Kerry Herbine	f. Fax No.
AZ 86409	Director	g. e-Mail
		h. Dispute Location (City and State) Kingman, AZ
Type of Establishment (factory, nursing home, hotel)	j. Principal Product or Service	k. Number of workers at dispute location
Hospital	Healthcare	~1500
ational Labor Relations Act, and these unfair la	nd is engaging in unfair labor practices within the mea bor practices are practices affecting commerce within a within the meaning of the Act and the Postal Reorga	the meaning of the Act, or these unfair labor
limited to, disciplining and threatening	tion 7 of the National Labor Relations Act,	including but not limited to DIGNOT
(b) (6), (b) (7)(C) because they engaged in By the above and other acts, the abothe exercise of their rights under Sector Full name of party filing charge (if labor organization) (b) (6), (b) (7)(C)	protected, concerted activities. ve-named employer has interfered with, retion 7 of the National Labor Relations Act. sation, give full name, including local name and number	strained, and coerced employees in
(b) (6), (b) (7)(C) because they engaged in By the above and other acts, the abothe exercise of their rights under Sector Full name of party filing charge (if labor organization) (b) (6), (b) (7)(C)	protected, concerted activities. ve-named employer has interfered with, retion 7 of the National Labor Relations Act. sation, give full name, including local name and number	strained, and coerced employees in
(b) (6), (b) (7)(C) because they engaged in By the above and other acts, the abothe exercise of their rights under Seciful name of party filing charge (if labor organization) (b) (6), (b) (7)(C)  Address (street and number, city, state, and 2)	protected, concerted activities. ve-named employer has interfered with, retion 7 of the National Labor Relations Act. sation, give full name, including local name and number	strained, and coerced employees in  er)  4b. Tel. No.
(b) (6), (b) (7)(C) because they engaged in By the above and other acts, the abouthe exercise of their rights under Sector Full name of party filing charge (if labor organization) (b) (6), (b) (7)(C)  a. Address (street and number, city, state, and 2)	protected, concerted activities. ve-named employer has interfered with, retion 7 of the National Labor Relations Act. sation, give full name, including local name and number	strained, and coerced employees in  4b. Tel. No.  4c. Cell No.  (b) (6), (b) (7)(C)  4d. Fax No.  4e. e-Mail
(b) (6), (b) (7)(C) because they engaged in By the above and other acts, the abothe exercise of their rights under Section 1. Full name of party filing charge (if labor organization) (b) (6), (b) (7)(C) a. Address (street and number, city, state, and 2 (b) (6), (b) (7)(C)	protected, concerted activities. ve-named employer has interfered with, retion 7 of the National Labor Relations Act. sation, give full name, including local name and number	strained, and coerced employees in  4b. Tel. No.  4c. Cell No.  (b) (6), (b) (7)(C)  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C) because they engaged in By the above and other acts, the abothe exercise of their rights under Sector Full name of party filing charge (if labor organization) (b) (6), (b) (7)(C). Address (street and number city, state, and 7) (b) (6), (b) (7)(C)  Full name of national or international labor organization)  DECLARATION declare that I have read the above charge a	protected, concerted activities. ve-named employer has interfered with, retion 7 of the National Labor Relations Act. vation, give full name, including local name and number (IP code)	strained, and coerced employees in  4b. Tel. No.  4c. Cell No.  (b) (6), (b) (7)(C)  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)
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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT



# UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

REGION 13 Dirksen Federal Building 219 South Dearborn Street, Suite 808 Chicago, IL 60604-2027

Agency Website: www.nlrb.gov Telephone: (312)353-7570 Fax: (312)886-1341

June 16, 2020

(Via email service unless otherwise indicated)

Kerry Herbine, Director Kingman Regional Medical Center 3269 Stocktonhill Road Kingman, AZ 86409 Via first class mail

Re: Kingman Regional Medical Center

Case 28-CA-261546

Dear Mr. Herbine:

This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

/s/ Peter Sung Ohr

Peter Sung Ohr Regional Director

cc:



Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA

UNITED STATES OF AMERICA	Α	DO NOT W	UTE IN THIS SPACE	
NATIONAL LABOR RELATIONS BC	DARD	Case	Date Filed	
CHARGE AGAINST EMPLOYER				
	2	8-CA-261737	6/11/2020	
File an original of this charge with NLRB Region	al Director in which	h the alleged unfeir tabor	proctice engaged	
1. EMPLOYER	AGAINST WHO!	M CHARGE IS BROUGH	processes occurred or is additing.	
a. Name of Employer				
Aetna Health Inc.			b. Tel. No.	
		<del></del>	(860) 273-7676	
			o. Cell No.	
d. Address (street, city, state ZIP code) 4350 E Cotton Center Blvd Phoenix, AZ 85040	e.Entroloyer R Andi Thilb Senior En Consultar	odeau, nployee Relations	f. Fax No.	
		3 300	g. e-Mail	· ·
	+		thibodeaua2@aetna.c	om
The second secon	1		h. Dispute Location (City and Phoenix, AZ	State)
Type of Establishment (factory, nursing home, hotel)	j. Principal Pro	duct or Service	k. Namber of workers at dispu	ite location
Medical Insurance Provider	Heath Insu	TRICO		
The above named contains her	100		~4500	
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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT
Solioitation of the information on this form, is authorized by the National Labor Relations Act (NURA), 29 U.S.C. 5 151 et seq. The principal use of the information is to set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NURB will further explain these uses upon request. Disclosure of this information to the

NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

(b) (6), (b) (7)(C)

NATIONAL LABOR R
REGION 21
US Court House, Spring Street
312 N Spring Street, 10th Floor
Los Angeles, CA 90012

Agency Website: www.nlrb.gov Telephone: (213)894-5200 Fax: (213)894-2778

July 27, 2020

(b) (6), (b) (7)(C)

Re: Aetna Health Inc. Case 28-CA-261737

Dear (b) (6), (b) (7)(C)

We have carefully investigated and considered your charge that Aetna Health Inc. has violated the National Labor Relations Act.

**Decision to Dismiss:** Based on that investigation, I have decided to dismiss your charge for the reasons discussed below.

Your charge alleges that the Employer violated Section 8(a)(1) of the Act by discharging you because you engaged in protected, concerted activities. The investigation, however, fails to show that you were engaged in conduct and/or made complaints that the Act deems protected, concerted activities. Further, the investigation does not establish that the Employer terminated you because of the complaints that you made.

Charging Party's Right to Appeal: The Charging Party may appeal my decision to the General Counsel of the National Labor Relations Board, through the Office of Appeals.

Means of Filing: You must file your appeal electronically or provide a written statement explaining why electronic submission is not possible or feasible (Written instructions for the NLRB's E-Filing system and the Terms and Conditions of the NLRB's E-Filing policy are available at <a href="www.nlrb.gov">www.nlrb.gov</a>. See <a href="www.nlrb.gov">User Guide</a>. A video demonstration which provides <a href="step-by-step instructions">step-by-step instructions</a> and frequently asked questions are also available at <a href="www.nlrb.gov">www.nlrb.gov</a>. If you require additional assistance with E-Filing, please contact <a href="E-File@NLRB.gov">E-File@NLRB.gov</a>.

You are encouraged to also submit a complete statement of the facts and reasons why you believe my decision was incorrect. If you cannot file electronically, please send the appeal and your written explanation of why you cannot file electronically to the **General Counsel** at the **National Labor Relations Board, Attn: Office of Appeals, 1015 Half Street SE, Washington, DC 20570-0001**. Unless filed electronically, a copy of the appeal should also be sent to me.

The appeal MAY NOT be filed by fax or email. The Office of Appeals will not process faxed or emailed appeals.

Appeal Due Date: The appeal is due on August 10, 2020. If the appeal is filed electronically, the transmission of the entire document through the Agency's website must be

completed **no later than 11:59 p.m. Eastern Time** on the due date. If filing by mail or by delivery service an appeal will be found to be timely filed if it is postmarked or given to a delivery service no later than August 9, 2020. **If an appeal is postmarked or given to a delivery service on the due date, it will be rejected as untimely**. If hand delivered, an appeal must be received by the General Counsel in Washington D.C. by 5:00 p.m. Eastern Time on the appeal due date. If an appeal is not submitted in accordance with this paragraph, it will be rejected.

**Extension of Time to File Appeal:** The General Counsel may allow additional time to file the appeal if the Charging Party provides a good reason for doing so and the request for an extension of time is **received on or before August 10, 2020.** The request may be filed electronically through the *E-File Documents* link on our website <a href="www.nlrb.gov">www.nlrb.gov</a>, by fax to (202)273-4283, by mail, or by delivery service. The General Counsel will not consider any request for an extension of time to file an appeal received after August 10, 2020, **even if it is postmarked or given to the delivery service before the due date.** Unless filed electronically, a copy of the extension of time should also be sent to me.

**Confidentiality:** We will not honor requests to limit our use of appeal statements or evidence. Upon a request under the Freedom of Information Act (FOIA) by a party during the processing of an appeal, the Agency's FOIA Branch discloses appeal statements, redacted for personal privacy, confidential source protection, or other applicable FOIA exemptions. In the event the appeal is sustained, any statement or material submitted may be introduced as evidence at a hearing before an administrative law judge. However, certain evidence produced at a hearing may be protected from public disclosure by demonstrated claims of confidentiality.

Very truly yours,

William B. Cowen Regional Director

Enclosure

cc: Andi Thibodeau, Senior Employee

Relations Consultant Aetna Health Inc.

Email: thibodeaua2@aetna.com

Cassandra L. Santoro, Attorney at Law

Morgan Brown & Joy, LLP

Email: csantoro@moganbrown.com

- 3 -

David P. Mason, Senior Legal Counsel – Labor and Employment CVSHealth

Email: david.mason@cvshealth.com

Joseph P. McConnell, Attorney at Law Morgan Brown & Joy, LLP Email: jmcconnell@morganbrown.com Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

a. Name of Employer

Oasis Hospital

d. Address (street, city, state ZIP code)

750 N 40th St, Phoenix, AZ 85008

b. Tel. No.

c. Cell No.

f. Fax No.

g. e-Mall

(602)797-7700

(602)797-7717

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

e. Employer Representative

Maurice Croteau

Director

		mcroteau@oasishospital.com
		h. Dispute Location (City and State)
		Phoenix, AZ
<ul> <li>Type of Establishment (factory, nursing home, hotel)</li> </ul>	j. Principal Product or Service	k. Number of workers at dispute location
Hospital	Healthcare	200
National Labor Relations Act, and these unfair labor practices are unfair practices affecting commerce v	is engaging in unfair labor practices within the meal or practices are practices affecting commerce within within the meaning of the Act and the Postal Reorga	the meaning of the Act, or these unfair labor nization Act.
On order to discourage protected		by discharging of in retaliation for
(b) (6), (b) (7)(C)	tion, give full name, including local name and numb	er)
4a. Address (street and number, city, state, and Zit (b) (6), (b) (7)(C)	P code)	4b. Tel. No. (b) (6), (b) (7)(C) 4c, Cell No.
		(b) (6), (b) (7)(C) 4d. Fax No.
8		
		4a. e-Mail (b) (6), (b) (7)(C)
<ol> <li>Full name of national or international labor organization)</li> </ol>	ization of which it is an affiliate or constituent unit (f	o be filled in when charge is filed by a labor
DECLARATION     I declare that I have read the above charge army knowledge and belief.	nd that the statements are true to the best of	Tel No. (b) (6), (b) (7)(C)
my knowledge and belief. (b) (6), (b) (7)(C) By:	(b) (6), (b) (7)(C)	Office If any, Cell No. (b) (6), (b) (7)(C)
(slgn	rge) Print Name and Title	Fax No.
Address: (b) (6), (b) (7)(C)	Date: -7/15/2020	e-Mall (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FIVE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

INTERNET FORM NLR9-501 (2-08)

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD AMENDED CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
28-CA-263122	9/15/2020

INSTRUCTIONS:

ile an original with NLRB Regional Director for the region in which	the alleged unfair labor practice occurred or is occur AGAINST WHOM CHARGE IS BROUGHT	rring.
a. Name of Employer		b. Tel. No. (602)797-7700
Oasis Hosptial		
		c. Cell No. (602)7977717
		f. Fax No.
d. Address (Street, city, state, and ZIP code) 750 N 40th St	e. Employer Representative Maurice Croteau	g. e-Mail
Phoenix, AZ 85008	Director	mcroteau@oasishospital.com
T HOOTIN, TE GOOD		h. Number of workers employed 200
Type of Establishment (factory, mine, wholesaler, etc.)     Hospital	j. Identify principal product or service Healthcare	
k. The above-named employer has engaged in and is engagin	ng in unfair labor practices within the meaning of s	section 8(a), subsections (1) and (list
subsections) 8(a)(1)		abor Relations Act, and these unfair labor
practices are practices affecting commerce within the mea within the meaning of the Act and the Postal Reorganization		unfair practices affecting commerce
2. Basis of the Charge (set forth a clear and concise stateme		
During the last six-months the Employer by its of		
its employees in the exercise of their Section 7 ri		
because engaged in protected concerted act		
employees that their protected activity was the re- protected activities.	eason for their discharge, and (3) interior	gating employees about their
protected activities.		
By the above and other acts the Employer has in	terfered with, restrained, and coerced e	mployees in the exercise of their
Section 7 rights under the National Labor Relation		•
3. Full name of party filing charge (if labor organization, give	full name, including local name and number)	
(b) (6), (b) (7)(C)  4a. Address (Street and number, city, state, and ZIP code)		4b. Tel. No. (b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		
(5) (5), (5) (1)(5)		4c. Cell No. (b) (6), (b) (7)(C)
		4d. Fax No.
		4e. e-Mail
		(b) (6), (b) (7)(C)
<ol> <li>Full name of national or international labor organization or organization)</li> </ol>	f which it is an affiliate or constituent unit (to be fill	led in when charge is filed by a labor
6. DECLARATI	ON	Tel. No.
I declare that I have read the above charge and that the stateme	ents are true to the best of my knowledge and belief.	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)	(b) (c) (b) (7)(c) 1- 45 ±41	Office, if any, Cell No.
By	(b) (6), (b) (7)(C), an Individual (Print/type name and title or office, if any)	(b) (6), (b) (7)(C)
(specification of the second o	(Finistype name and use of diace, it any)	Fax No.
		0
	alista	e-Mail
(b) (6), (b) (7)(C)	9/15/2020 (date)	e-Maii (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

# UNITED STATES OF AMERICA BEFORE THE NATIONAL LABOR RELATIONS BOARD REGION 28

**OASIS HOSPITAL** 

and

Case 28-CA-263122

(b) (6), (b) (7)(C), an Individual

# ORDER CONDITIONALLY APPROVING WITHDRAWAL OF CHARGE, DISMISSING COMPLAINT, AND VACATING NOTICE OF HEARING

On September 30, 2020, a Complaint and Notice of Hearing (Complaint) issued in the above-captioned case, setting the matter for hearing on July 20, 2021. On November 30, 2020, the Charging Party requested permission to withdraw its charge on the grounds that the parties have entered into non-Board settlement. The non-Board settlement entered into by the parties contains undertakings that have not yet been performed. Accordingly,

IT IS ORDERED that the Withdrawal Request filed by the Charging Party on November 30, 2020, be, and the same is, conditionally approved, contingent upon the performance of the respective parties' undertakings in the non-Board settlement.

IT IS FURTHER ORDERED that the Complaint previously issued in this matter be, and the same is, dismissed and the notice of hearing vacated.

IT IS FURTHER ORDERED that upon application by the Charging Party, supported by evidence that the remaining undertakings in the non-Board settlement have not been substantially complied with, the charge in this matter may be subject to reinstatement for

further processing, including, but not limited to, the reissuance of a complaint and notice of hearing.

Dated at Phoenix, Arizona this 18th day of December, 2020.

/s/ Barbara B. Baynes
Barbara B. Baynes, Acting Regional Director

INTERNET FORM NLRB-501

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
28-CA-264451	August 11, 2020

INSTRUCTIONS: File an original with NLRB Regional Director for he region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT b. Tel. No. a. Name of Employer (602) 406-4219 Dignity Health c. Cell No. f. Fax No. d. Address (Street, city, state, and ZIP code) e. Employer Representative g. e-Mail Therese Valadez 185 Berry St. Ste. 300 therese.valadez@dignityhealth.org **Human Resources Director** CA San Francisco 94107h. Number of workers employed 500 i. Type of Establishment (factory, mine, wholesaler, etc.) j. Identify principal product or service Healthcare Healthcare k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) --See additional page--3. Full name of party filing charge (if labor organization, give full name, including local name and number) 4b. Tel. No. 4a. Address (Street and number, city, state, and ZIP code) (602) 753-2933 4c Cell No c/o Hernandez Law Firm PLC 5330 N. 12th St AZ Pheonix 85014-4d. Fax No. 4e. e-Mail isaac@hdezlawfirm.com 5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization) Tel. No. 6. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief. (602) 753-2933 Office, if any, Cell No. Isaac Pasaret Hernandez Isaac P. Hernandez (signature of representative or person making charge) (Print/type name and title or office, if any) Fax No. e-Mail 5330 N. 12th Street 08/11/2020 14:49:10 isaac@hdezlawfirm.com Address Phoenix AZ 85014-

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

(date)

# **Basis of the Charge**

### 8(a)(1)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	Termination	(b) (6), (b) (7)(C) 2020



### UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD REGION 28 2600 North Central Avenue

Suite 1400

Phoenix, AZ 85004-3099

Agency Website: www.nlrb.gov Telephone: (602)640-2160

Fax: (602)640-2178

December 22, 2020

Judy S. Coffin, System VP & Associate General Counsel Dignity Health 185 Berry Street, Suite 300 San Francisco, CA 94107-1773

Lindsay J. Fiore, Attorney at Law Greenberg Traurig, LLP 2375 East Camelback Road, Suite 700 Phoenix, AZ

Re:

Dignity Health Case 28-CA-264451

Dear Ms. Coffin and Ms. Fiore:

The Charging Party has asked to withdraw the above charge based upon a private agreement between the parties. I have approved this request, conditioned on the performance of the undertakings in that private agreement.

The charge is subject to reinstatement for further processing if the Charging Party requests reinstatement and supports its request with evidence of non-compliance with the undertakings in the private agreement.

Very truly yours,

/s/ Barbara B. Baynes

Barbara B. Baynes Acting Regional Director

Dignity Health cc: 185 Berry Street, Suite 300 San Francisco, CA 94107

Isaac P. Hernandez, Attorney at Law Hernandez Law Firm PLC 5330 North 12th Street Phoenix, AZ 85014

(b) (6), (b) (7)(C)

BBB:KL:mhz

INTERNET FORM NLRB-501

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
28-CA-264454	8/11/2020

INSTRUCTIONS

INSTRUCTIONS:	20 0/120 110 1	De Deben College Colle
File an original with NLRB Regional Director for the region in which the		ring.
WW PARTY DON	GAINST WHOM CHARGE IS BROUGHT	b. Tel. No.
a. Name of Employer		(602) 406-4219
Dignity Health		c. Cell No.
		c. Cell No.
		f. Fax No.
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	1. 1 4.776.
	20 (3)	g. e-Mail
185 Berry St., Ste. 300	Therese Valadez	therese.valadez@dignityhealth.org
CA San Francisco 94107	Human Resources Director	
		h. Number of workers employed 500
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	
Healthcare	Healthcare	
k. The above-named employer has engaged in and is engaging	in unfair labor practices within the meaning of se	ection 8(a), subsections (1) and (list
subsections)	of the National La	bor Relations Act, and these unfair labor
practices are practices affecting commerce within the meaning		and the second s
within the meaning of the Act and the Postal Reorganization	세	inial practices allecting commerce
Basis of the Charge (set forth a clear and concise statement)		practicael
2. Dasis of the Charge (set forth a clear and concise statement	or the racts constituting the alleged urnal rabor p	of actices)
See additional page		
occ additional page		
3. Full name of party filing charge (if labor organization, give fu	ll name, including local name and number)	
(b) (6), (b) (7)(C)		
As Address (Chast and number site state and 710 ands)		4b. Tel. No.
4a. Address (Street and number, city, state, and ZIP code)		(602) 753-2933
		4c Cell No
c/o Hernandez Law Firm 5330 N. 12th St		
AZ Phoenix 85014		4d. Fax No.
		4e. e-Mail
		isaac@hdezlawfirm.com
5. Full name of national or international labor organization of w	hich it is an affiliate or constituent unit (to be fille	d in when charge is filed by a labor
organization)		
6. DECLARATION		Tel. No.
I declare that I have read the above charge and that the statements	are true to the best of my knowledge and belief.	(602) 753-2933
	Isaac Pasaret Hernandez	Office, if any, Cell No.
By Isaac P. Hernandez Title:	isaac Fasaiet Heillalluez	omeo, ii diiy, ooii ito.
	(Print/type name and title or office, if any)	Fax No.
900 V V V V V V V V V V V V V V V V V V		
		e-Mail
5330 N. 12th Street	08/11/2020 14:56:25	isaac@hdezlawfirm.com
Address_Phoenix AZ 85014-	(date)	isaaciwiiacziawiiiii.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

# **Basis of the Charge**

### 8(a)(1)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	Termination	(b) (6), (b) (7)(C), 2020



### UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD REGION 28

2600 North Central Avenue Suite 1400

Phoenix, AZ 85004-3099

Agency Website: www.nlrb.gov Telephone: (602)640-2160

Fax: (602)640-2178

December 22, 2020

Judy S. Coffin, System VP & Associate General Counsel Dignity Health 185 Berry Street, Suite 300 San Francisco, CA 94107

Lindsay J. Fiore, Attorney at Law Greenberg Traurig, LLP 2375 East Camelback Road, Suite 700 Phoenix, AZ

Re: Dignity Health

Case 28-CA-264454

Dear Ms. Coffin and Ms. Fiore:

The Charging Party has asked to withdraw the above charge based upon a private agreement between the parties. I have approved this request, conditioned on the performance of the undertakings in that private agreement.

The charge is subject to reinstatement for further processing if the Charging Party requests reinstatement and supports its request with evidence of non-compliance with the undertakings in the private agreement.

Very truly yours,

/s/ Barbara B. Baynes

Barbara B. Baynes Acting Regional Director

cc: Dignity Health
185 Berry Street, Suite 300
San Francisco, CA 94107

Isaac P. Hernandez, Attorney at Law Hernandez Law Firm, PLC 5330 North 12th Street Phoenix, AZ 85014 (b) (6), (b) (7)(C)

BBB:KL:mhz

INTERNET FORM NLRB-501

#### UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
28-CA-269149	November 16, 2020

#### INSTRUCTIONS:

	ile an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.		
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer		b. Tel. No. (469) 893-2000	
Tenet Healthcare		c. Cell No.	
		c. Cen No.	
		f. Fax No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative		
1145 Ross Avenue Suite 1400		g. e-Mail	
TX Dallas 75202-			
17 Dulius 13202		h. Number of workers employed	
		3000	
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service		
Healthcare Facilities	Medical Services		
k. The above-named employer has engaged in and is engaging i	n unfair labor practices within the meaning of secti	on 8(a), subsections (1) and (list	
subsections)		r Relations Act, and these unfair labor	
practices are practices affecting commerce within the meaning within the meaning of the Act and the Postal Reorganization A	마음을 하다 아니는 아이들이 아이를 하는 것이 말을 하는 것이 아이들이 얼마를 하는데 아이들이 얼마를 다 하는데 아이들이 아이들이 얼마를 하는데 하는데 아이들이 아이들이 아이들이 아이들이다.	air practices affecting commerce	
2. Basis of the Charge (set forth a clear and concise statement of	of the facts constituting the alleged unfair labor pract	ctices)	
w			
See additional page			
3. Full name of party filing charge (if labor organization, give full	name including local name and number		
(b) (6), (b) (7)(C) Title:	name, including local hame and number)		
Title.			
4a. Address (Street and number, city, state, and ZIP code)	4	4b. Tel. No. (b) (6), (b) (7)(C)	
	_		
(b) (6), (b) (7)(C)		4c Cell No	
	4	4d. Fax No.	
	4	le. e-Mail	
		(b) (6), (b) (7)(C)	
Full name of national or international labor organization of wh	ich it is an affiliate or constituent unit /to be filled in	N. Co. (1970) 20 (1970) 20 (1970) 10 (1970) 10 (1970)	
organization)	ici i i di di di di constituori di il (co po mod m	Who i ordinge to mod by a labor	
6. DECLARATION	AND THE RESIDENCE AND THE STREET, THE PARTY MADE AND THE STREET, T	Tel. No.	
I declare that I have read the above charge and that the statements	are true to the best of my knowledge and belief.	(602) 404-0099	
	Elliot Isaac (	Office, if any, Cell No.	
By Elliot S. Isaac Title:	Elliot Isaac	, , , , , , , , , , , , , , , , , , , ,	
(signature of representative or person making charge) (i	Print/type name and title or office, if any)	Fax No.	
14820 N. Cave Creek Road Suite 3	11/16/2020 16:41:51	e-Mail	
Address Phoenix AZ 85032-	(date)	isaaclawyer@gmail.com	
AND VALUE AND	- 200006		

### WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

### **Basis of the Charge**

#### 8(a)(1)

Within the previous six months, the Employer discharged an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

	Approximate date of discharge
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(c), 2020

#### 8(a)(1)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	firing	®®®®®, 2020



### UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD REGION 28

2600 North Central Avenue Suite 1400

Phoenix, AZ 85004-3099

Agency Website: www.nlrb.gov Telephone: (602)640-2160 Fax: (602)640-2178

February 3, 2021

Abrazo Health 18701 North 67th Avenue Glendale, AZ 85308

> Re: Tenet Healthcare d/b/a VHS of Arrowhead,

> > Inc. d/b/a Abrazo Arrowhead Campus

Case 28-CA-269149

#### Ladies and Gentlemen:

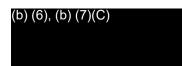
This is to advise you that I have approved the withdrawal of the charge in the above matter.

Very truly yours,

/s/ Cornele A. Overstreet

Cornele A. Overstreet Regional Director

Gareth Holdstock, Chief HR Officer cc: Tenet Healthcare d/b/a VHS of Arrowhead, Inc. d/b/a Abrazo Arrowhead Campus 1145 Ross Avenue, Suite 1400 Dallas, TX 75202



Elliot S. Isaac, Attorney at Law Law Office of Elliot S. Isaac, P.C. 14820 North Cave Creek Road, Suite 3 Phoenix, AZ 85032

CAO/NG/mhz

INTERNET FORM NLRB-501

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case		Date Filed
	28-CA-271943	1/28/2021

#### INSTRUCTIONS:

ile an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.			
1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer		b. Tel. No. (520) 836-3446	
Sun Life Family Health Center		35 40	
		c. Cell No.	
		f. Fax No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	1. 1 42 140.	
	62 63 53	g. e-Mail	
PO Box 10097			
AZ Casa Grande 85130		h. Number of workers employed	
		h. Number of workers employed 75	
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service		
Healthcare	medical services		
k. The above-named employer has engaged in and is engaging	in unfair labor practices within the meaning of sect	ion 8(a), subsections (1) and (list	
subsections) 1		2002 200 200 200 C	
		or Relations Act, and these unfair labor	
practices are practices affecting commerce within the meaning within the meaning of the Act and the Postal Reorganization A	그렇게 하나 얼마 하지만 하지만 얼마는 일로 하는데 보고 아내는 얼마를 하는데	air practices affecting commerce	
2. Basis of the Charge (set forth a clear and concise statement of	of the facts constituting the alleged unfair labor pra	actices)	
5 4			
See additional page			
3. Full name of party filing charge (if labor organization, give full	name, including local name and number)		
(b) (6), (b) (7)(C)			
		AL T-I N-	
4a. Address (Street and number, city, state, and ZIP code)			
(b) (6), (b) (7)(C)	ħ.	4b. Tel. No. (b) (6), (b) (7)(C)	
		(b) (6), (b) (7)(C) 4c Cell No	
	<u> </u>	(b) (6), (b) (7)(C)	
	<u> </u>	(b) (6), (b) (7)(C)	
		(b) (6), (b) (7)(C) 4c Cell No	
		(b) (6), (b) (7)(C) 4c Cell No 4d. Fax No. 4e. e-Mail	
5 Full name of national or international labor organization of wh	•	(b) (6), (b) (7)(C) 4c Cell No 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)	
Full name of national or international labor organization of whorganization)	•	(b) (6), (b) (7)(C) 4c Cell No 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)	
	•	(b) (6), (b) (7)(C) 4c Cell No 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)	
organization)  6. DECLARATION	nich it is an affiliate or constituent unit (to be filled in	(b) (6), (b) (7)(C) 4c Cell No 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)	
organization)	nich it is an affiliate or constituent unit (to be filled in	(b) (6), (b) (7)(C) 4c Cell No 4d. Fax No. 4e. e-Mail  (b) (6), (b) (7)(C)  In when charge is filed by a labor	
6. DECLARATION I declare that I have read the above charge and that the statements	nich it is an affiliate or constituent unit (to be filled in are true to the best of my knowledge and belief.	(b) (6), (b) (7)(C)  4c Cell No  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)  In when charge is filed by a labor  Tel. No.  (602) 404-0099	
6. DECLARATION I declare that I have read the above charge and that the statements	nich it is an affiliate or constituent unit (to be filled in are true to the best of my knowledge and belief.	(b) (6), (b) (7)(C)  4c Cell No  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)  In when charge is filed by a labor  Tel. No.	
6. DECLARATION I declare that I have read the above charge and that the statements  By	are true to the best of my knowledge and belief.	(b) (6), (b) (7)(C)  4c. Cell No  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)  In when charge is filed by a labor  Tel. No.  (602) 404-0099  Office, if any, Cell No.	
6. DECLARATION I declare that I have read the above charge and that the statements  By	are true to the best of my knowledge and belief.	(b) (6), (b) (7)(C)  4c Cell No  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)  In when charge is filed by a labor  Tel. No.  (602) 404-0099	
6. DECLARATION I declare that I have read the above charge and that the statements  By	are true to the best of my knowledge and belief.  Elliot Isaac  Print/type name and title or office, if any)	(b) (6), (b) (7)(C)  4c. Cell No  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)  In when charge is filed by a labor  Tel. No.  (602) 404-0099  Office, if any, Cell No.	
I declare that I have read the above charge and that the statements  By  Title:	are true to the best of my knowledge and belief.  Elliot Isaac  Print/type name and title or office, if any)	(b) (6), (b) (7)(C)  4c. Cell No  4d. Fax No.  4e. e-Mail  (b) (6), (b) (7)(C)  In when charge is filed by a labor  Tel. No.  (602) 404-0099  Office, if any, Cell No.  Fax No.	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

### **Basis of the Charge**

#### 8(a)(1)

Within the previous six months, the Employer discharged an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee discharged	Approximate date of discharge
(b) (6), (b) (7)(C)	<sup>(0)(6),(0)(7</sup> /2020

#### 8(a)(1)

Within the previous six months, the Employer disciplined or retaliated against an employee(s) because the employee(s) engaged in protected concerted activities by, inter alia, protesting terms and conditions of employment and in order to discourage employees from engaging in protected concerted activities.

Name of employee disciplined/retaliated against	Type of discipline/retaliation	Approximate date of discipline/retaliation
(b) (6), (b) (7)(C)	termination	<sup>®(©,©)(7</sup> /2020